

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#19/RCE  
8/6/02  
Schmidt

Applicant(s): Timothy K. Carns, Lee J. DeBruler, John L. Horvath, Michael J. Westphal  
Assignee: ZiLOG, Inc.  
Title: PROCESS TO IMPROVE HIGH PERFORMANCE CAPACITOR PROPERTIES IN INTEGRATED MOS TECHNOLOGIES  
Serial No.: 09/351,544 Filing Date: July 12, 1999  
Examiner: Brock II, P. Group Art Unit: 2815  
Docket No.: M-10889 US (Formerly ZILG.204US0)

San Francisco, California  
July 30, 2002

BOX RCE  
COMMISSIONER FOR PATENTS  
Washington, D. C. 20231

**REQUEST FOR CONTINUED EXAMINATION (RCE)**

Dear Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

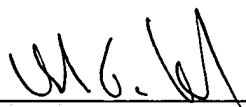
Please consider the enclosed Amendment, which is in response to the Final Office Action dated May 3, 2002.

The RCE fee required under 37 C.F.R. § 1.17(e) is authorized in an accompanying transmittal letter.

Please contact the undersigned attorney with any questions concerning this request or the above-identified patent application.

**EXPRESS MAIL**  
**LABEL NO:**  
**EL947770641US**

Respectfully submitted,

  
Michael G. Cleveland  
Reg. No. 46,030

July 30, 2002  
Date

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08/02/2002 AWONDAF1 00000039 192386 09351544

01 FC:179  
02 FC:102  
03 FC:103

740.00 CH  
336.00 CH  
342.00 CH  
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TECHNOLOGY CENTER 2800

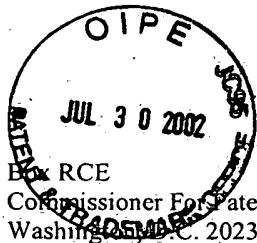
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Docket No.: M-10889 US

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Re: Applicant(s): Timothy K. Carns, Lee J. DeBruler, John L. Horvath, Michael J. Westphal  
Assignee: ZiLOG, Inc.  
Title: PROCESS TO IMPROVE HIGH PERFORMANCE CAPACITOR PROPERTIES IN INTEGRATED MOS TECHNOLOGIES  
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Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Return Receipt Postcard;
- (2) This Transmittal Letter (in duplicate);
- (3) Request for Continued Examination (RCE) - 1 page;
- (4) Amendment - 28 pages; and
- (5) Declaration of Timothy K. Carns - 2 pages.



No additional fee is required.



The fee has been calculated as shown below:

**CLAIMS AS AMENDED**

	Claims Remaining <u>After Amendment</u>		Highest No. Previously <u>Paid For</u>		Present <u>Extra</u>		Rate		Additional <u>Fee</u>
Total Claims	61	Minus	42	=	19	x	\$18.00	\$	342.00
Independent Claims	12	Minus	8	=	4	x	\$84.00	\$	336.00
<input type="checkbox"/>	Fee of _____ for the first filing of one or more multiple dependent claims per application.							\$	0.00
<input type="checkbox"/>	Fee for Request for Continued Examination							\$	740.00
<b><u>Total additional fee for this Amendment:</u></b>								\$	<u>1,418.00</u>
<input checked="" type="checkbox"/>	Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.								
<input checked="" type="checkbox"/>	Please charge our Deposit Account No. 19-2386 in the amount of							\$	<u>1,418.00</u>
<input checked="" type="checkbox"/>	Also, charge any additional fees required and credit any overpayment to our Deposit Account No. 19-2386.								
<b>Total:</b>								\$	<u>1,418.00</u>

**EXPRESS MAIL LABEL NO.:**

**EL947770641**

Respectfully submitted,

Michael G. Cleveland  
Reg. No. 46,030